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II HAR ILL PH 2:

J. SAULSBERRY EXAMINER MAR 1 6 2011

COVER LETTER

TO:	Registration S Division of Co						
SUBJE	ECT:	BAY\	WAY C, LLC				
		Name of Limi	ted Liability Company				
		f Amendment and fee(s) are subsequence concerning this matter	-				
			Mark E. Miller				
			Name of Person				
			Firm/Company				
	1001 S. MacDill Avenue, Suite B						
			Address		TAT	201	
	Tampa, FL 33629				ECRI	=	\$43
		City/State and Zip Code			HAS MATE	20	
		E-mail address: (mem@bayway.com to be used for future annual report notifica	tion)	SEE SY 0	E-	y
For fur	ther information	concerning this matter, please of	eall:		OF STATE.	2011 MAR 14 PM 2:34	
	M	lark E. Miller	ai(<u></u>)	51-2900	7 <u>4</u> 0	<u>ည</u>	
	Name	of Person	Area Code & Daytime T	elephone Number			
Enclos	ed is a check for	the following amount:					
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status		
MAILING ADDRESS: Registration Section Division of Corporations		tration Section	STREET/COURIE Registration Section Division of Corporat				

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	BAYWAY C, LLC _		
(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Compan	pears on our records.)	
		March 4 2044	
The Articles of Organization for this Limite	• • •	March 4, 2011	and assigned
Florida document numberL11000	027370		
This amendment is submitted to amend the	following:		
A. If amending name, enter the new nam	e of the limited liability company	<u>here</u> :	
The new name must be distinguishable and end "L.L.C."	with the words "Limited Liability Cor	npany," the designation "Ll	_C" or the abbreviation
E.D.C.			
Enter new principal offices address, if ap	plicable:		<u> </u>
(Principal office address MUST BE A STR	REET ADDRESS)		
		3	n≥
D		ŗ	
Enter new mailing address, if applicable:		<u> </u>	
<u>(Mailing address MAY BE A POST OFFI</u>	CE BOX)		- \(\display\)
			$\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$
		•	P 4
B. If amending the registered agent a		n our records, <u>enter</u> th	e name of the nev
registered agent and/or the new registered	d office address here:		
Name of New Registered Agent:			
New Registered Office Address:			
· · · · · · · · · · · · · · · · · · ·		Enter Florida street addr	ess
		, Florida	
	City		7in Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	MARK E. MILLER	1001 S. MacDill Avenue Suite B Tampa, FL 33629	✓ Add ☐ Remove
			☐ Add ☐ Remove
	•		Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add
D. If amen	ding any other information, ente	r change(s) here: (Attach additional sheets, if neces	Remove T
_			
Dated	March 10	2011	
		7 IL	
	Signature of a	member or authorized representative of a member	
		Mark E. Miller Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00